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FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H99934

(2)

1. Corporation Name

NIEL ENGINEERING CORP.

Principal Place of Business

Mailing Address

1275 GO. PATRICK DRIVE
UNIT #D
SATELLITE BEACH FL 32937

PO BOX 410196
MELBOURNE FL 32941-0196
US



2. Principal Place of Business

2a. Mailing Address

21 415 PINEDA COURT

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE A

27

City & State

City & State

23 MELBOURNE, FL

28

Zip

Country

Zip

Country

24 32940

25 USA

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/14/1986

3a. Date of Last Report

03/12/1996

4. FEI Number

59-2678323

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

CLERC, JEAN YVES
1275 S PATRICK #D
SATELLITE BEACH FL 32937

81 Name

CHRISTOPHER J. COLEMAN, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

1800 W. HIBISCUS BLVD.

83

SUITE 138

84 City

MELBOURNE

FL

85 Zip Code
32901

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

4/19/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME NIELSEN, PATRICK
STREET ADDRESS 34 RUE GUYNEMER
CITY-ST-ZIP PARIS 6, FRANCE

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

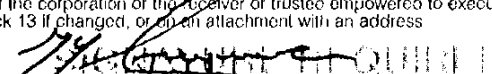
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address

SIGNATURE:



CR2E034 (9/96)